

UNITED STATES BANKRUPTCY COURT  
WESTERN DISTRICT OF NORTH CAROLINA  
CHARLOTTE DIVISION

In re: )  
 ) Case No.: 22-30232  
KLMKH, INC., )  
 ) Chapter 11  
Debtor. )

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**NOTICE TO CREDITORS HOLDING TWENTY LARGEST UNSECURED CLAIMS**

The above-referenced debtor has filed a Chapter 11 petition in the Western District of North Carolina. The Bankruptcy Code, 11 U.S.C. § 1102, requires the Court to appoint a Committee of Unsecured Creditors. Normally the committee consists of those persons willing to serve who hold the seven largest unsecured claims against the debtor.

You or your company have been listed by the debtor as one of the creditors holding the twenty largest claims against the debtor. Information regarding the function of the Creditors' Committee is enclosed with this notice. If you are interested in serving as a member of the Creditors' Committee, please fill out and return the enclosed Notice of Intent to Accept/Decline Appointment to the Creditors' Committee within ten (10) days of the date of this notice. If appointed, you will receive a copy of the order appointing the Creditors' Committee. The first Creditors' Committee meeting will be held immediately following the first meeting of creditors unless you receive notice that it will be held at an earlier date.

Please return the Notice of Intent to Accept/Decline Appointment to the Creditors' Committee to the undersigned at the address indicated below within **ten (10) days** of the date of this notice.

Dated: May 31, 2022.

/s/ Shelley K. Abel  
Shelley K. Abel  
United States Bankruptcy Administrator  
402 W. Trade Street, Suite 200  
Charlotte, NC 28202-1669  
N.C. Bar #34370  
Telephone: (704) 350-7587 Fax: (704) 344-6666

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**NOTICE OF INTENT TO ACCEPT/DECLINE APPOINTMENT TO  
CREDITORS' COMMITTEE**

The undersigned, a representative of the company or individual listed below,

\_\_\_ Agrees to accept appointment to the Committee of Unsecured Creditors in the above-referenced case, if so appointed by the Court.

\_\_\_ Declines to accept appointment to the Committee of Unsecured Creditors in the above-referenced case.

Name of Creditor: \_\_\_\_\_

Name of Representative: \_\_\_\_\_

Address of Representative: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Amount of Claim: \$ \_\_\_\_\_

Type of Claim: \_\_\_\_\_

(Please note if you contend that your claim is secured by a lien on property of the debtor or if you maintain a priority status.)

Relationship to Debtor: \_\_\_\_\_

(Please state whether the creditor is related to the debtor as an insider or other pertinent relationship.)

Representative's Telephone No.: \_\_\_\_\_ Email: \_\_\_\_\_

Dated: \_\_\_\_\_

\_\_\_\_\_  
Signature

**Return to: Office of the Bankruptcy Administrator, 402 W. Trade Street, Suite 200, Charlotte, NC 28202-1669, Fax (704) 344-6666, Email: sarah\_e\_scholz@ncwba.uscourts.gov.**